SUBMIT: COMPLETED APPLICATION, TAX Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT

BAYFIELD COUNTY, WISCOMS IN

9 242014

FNTER Date: Permit #: Amount Paid:

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800 10-87-14

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department Bayfield Co. Zoning Days.

Refund:

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. 000 0Hs Address of Property: Contractor: × Existing Structure: (if permit being applied for is relevant to it)
Proposed Construction: X Non-Shoreland ☐ Shoreland TYPE OF PERMIT REQUESTED → X LAND USE Authorized Agent: of Completion donated time & Value at Time Rec'd for Issuance PROJECT LOCATION FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

Heart dectare that this application incompanying information) has been examined by me (u.s.) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable fuce for the purpose of inspection. Municipal Use Commercial Use Residential Use Proposed Use SING Section 04 Mon X 1/4 ☐ Conversion
☐ Relocate (existing bldg) Run a Business on New Construction

Addition/Alteration s V $\hfill\square$ Is Property/Land within 1000 feet of Lake, Pond or Flowage Legal Description: (Use Tax Statement) ☐ Is Property/Land within 300 feet of River, Stream (incl. Interm Creek or Landward side of Floodplain? If yes--continue Property , Township abou Project 1/4 \mathbf{X} Construction Swan son Other: (explain Conditional Use: (explain) Residence (i.e. cabin, hunting shack, etc. Special Use: (explain) Accessory Building Addition/Alteration (specify) **Accessory Building** Addition/Alteration (specify) Mobile Home (manufactured date) **Bunkhouse** w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep Principal Structure (first structure on property) んだ Gov't Lot N, Range with a Porch with (2nd) Porch and/or basement □ No Basement with Attached Garage with (2nd) Deck with a Deck with Loft Basement 1-Story Foundation 2-Story # of Stories 1-Story + Loft SANITARY

Mailing Addre (specify) Contractor Phone:
798-4343
Agent Phone: 14895 PIN: (23 digits) -43-67-17-404-600-0508 Column ٤ City/State/Zip: 259 If yes---continue If yes---continue CSM **Proposed Structure** Apa Length: Length: A. Seasonal Year Round SO THE SOUTH OF TH PRIVY Use Kenne nittent) The state of the s Plumber: Riverside Rd, Agent Mailing Address (include City/State/Zip): CONDITIONAL USE | City/State/Zip: able Distance Structure is from Shoreline : Distance Structure is from Shoreline: bedrooms None Lot(s) o, # ىر Š Sanitary (Exists):

Privy (Pit) or □ Width: James James Municipal/City (New) Sanitary Portable (w/service contract) Block(s) No. Compost Toilet 5 N S facilities) Cable, W SPECIAL USE Sewer/Sanitary System ۲ Is on the property? Recorded Documer. Subdivision: What Type of 482 feet Specify Type: Cont Vaulted (min 200 gallon) Specify Type: **Dimensions** Is Property in Floodplain Zone? □ B.O.A. 76× 76× $\times |\times| \times$ $\times |\times| \times |\times| \times |\times| \times |\times|$ × \times Height: oN X nent: (i.e. Property Ow Telephone: 798-5458 Cell Phone: Plumber Phone Written Authorization 530-002B Page(s)__ OTHER 75.51 198 iğ O Are Wetlands Footage Present? ☐ Yes N N □ Xwell Water

Attach

Copy of Tax Statement if you recently purchased the property send your Recor ded Deed

Owner(s): 乂

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(If there are Mb

Deed All Ov

sign <u>or</u> letter(s) of authorization

accompany this application)

Date

2

Date

Authorized Agent:

(If you are signing on behalf of the owner(s) a letter of authorization

must accompany this application)

Address to send permit

Same

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Charles Continued to the constituting	erty Lines Represented by Owner Was Property Surveyed		es UNO	ally Created Delineated
10 - 77) above (prior to continuing) Champion (P) Champi	anted by Variance (B.O.A.)	N. 11		
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Wetlands; or (*) Slopes over 20% See Adams of the Continuing of the Planning & Zoning to closest point) Changes in plans must be approved by the Planning & Zoning to closest point) Changes in plans must be approved by the Planning & Zoning to closest point) Measurement Description Measurement ADA Feet Setback from the Lake (ordinary high-water mark) ADA Feet Setback from the Bank or Bluff ADA Feet Setback from Wetland DA Setback fro	be measured must be visible from one previou	Feet ed setback, the boun	(10) feet of the minimum requ	ble, Compos uction of a structur
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Wetlands; or (*) Slopes over 20% Setback from the Lake (ordinary high-water mark) Measurement Setback from the River, Stream, Creek MA Feet Setback from the Bank or Bluff MA Feet Setback from the Bank or Bluff MA Feet Setback from the Bank or Bluff MA MA MA MA MA MA MA MA MA	perty			k from the South Lot Line k from the West Lot Line k from the East Lot Line
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S; or (*) Slopes over 20% Ce at a Chment Measurement	from the Lake (ordinary high-water mark) from the River, Stream, Creek			Setback from the Centerline of Platted Road Setback from the Established Right-of-Way
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now any (*): (*) Wetlands; or (*) Slopes over 20% See attachment	Changes in plans must be approved by the Planning & Zo		he closest point)	(8) Setbacks: (measured to t
			continuing)	se complete (1) - (7) shows incorre
	rement		See	
				*;
	r (*) Pond	Stream/Creek; c lopes over 20%	(*) Lake; (*) River; (*) Stream/Creek; (*) Wetlands; or (*) Slopes over 20%	Show any (*): Show any (*):
₩	ame Frontage Road) y rain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)	rontage Road (Nontage Road) on your Propert c Tank (ST); (*) D	*) Driveway and (*) I *) Existing Structures *) Well (W); (*) Septi	(4) Show: (5) Show:

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Eayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELDECOLINETY WISCONSIN Imp (Received) 3 2014

Bayfield Co. Zoning Dept.

Refund:

Date: Permit #: 11.4.14 hr-h-11 14-0427

INSTRU Checks DO NO ed until all fees are paid.

A COMPANY CONTROL OF THE ACT AND AND THE PROPERTY OF THE ACT OF TH	necks are made payable to: Bayfield County Zoning Department.	
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			Value at Time of Completion * include donated time & material	-	Non-Shoreland	☐ Shoreland — *			Section 1	NV21/4, SE	PROJECT LOCATION	Authorized Agent: (F	Contractor:	0250	Address of Property:	Owner's Name:	DO NOT START CONSTRI
Conversion	☐ Addition/Alteration	X New Construction	Project			☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Creek or Landward side of Floodplain? If yescontinue —▶		5 , Township 43 A	St 1/4 Gov't Lot	Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s)	Tucek		J. Ma Cauley	EQUESTED—► \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.
2-Story	☐ 1-Story + Loft	🕅 1-Story	# of Stories and/or basement			1000 feet of Lake	1300 feet of River, If Floodplain?		N, Range	Lot Lot(s)			75			□ SAN	E BEEN ISSUED TO AF
	ft 📐 Year Round	☐ Seasonal	nt Use			, Pond or Flowage If yescontinue →	Stream (incl. Intermittent) If yescontinue		W Town of:	CSM Vol & Page	PIN: (23 digits) Recorded PIN: (23 digits) R	Agent Phone:	Contractor Phone: 798-4343		City/State/Zip:	Address:	
w	<u></u> 2	1	# of bedrooms	-		Distance Stru	Distance Stru	(2010)	27/	$\hat{m}^{\hat{g}}_{\hat{g}}$	7-15-4 oc	Agent Mailing Add	Plumber:			City/State/	
Sanitary (Exists) Specify Type:	X (New) Sanitary	☐ Municipal/City	W Sewer/ Is on			Distance Structure is from Shoreline:	Distance Structure is from Shoreline:		Lo	Block(s) No.	Re 1-254-3000000	Agent Mailing Address (include City/State/Zip):			Cable, WISY	City/State/Zip: SPECIAL USE	
Specify Type:	Specify Type:		What Type of Sewer/Sanitary System Is on the property?			Ä	1.t		Lot Size	Subdivision: Pineview	Recorded Document: (i.e. Property Ownership) Nolume 1133 Page(s) 353	/Zip):			821	USE B.O.A	
	DAV)							Acreage	الم الما	:: (i.e. Property Ownership Page(s) 353	Written Authorization Attached Yes No	Plumber Phone:	and the second s	758-4469	Telephone: 7/5	
	X Well	☐ City	Water			∑Yes No	Are Wetlands Present?		•	.•	wnership)	rization			469	_الت	

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Secretarial State			Hec'd for Issuance		□ Wunicipal Use				Commercial Use				∠ Residential Use	>		- The state of the	Proposed Use	Proposed Construction:	Existing Structure:	- Annihi ay)		of Completion * include donated time &
toff H	£	200 200 200 200	ance		se				Use		<u> </u>		Use	discourse	Τ		no	ıction:	e: (if perm		Property	🗌 Run a	☐ Reloc	□ Conversion	☐ Addit	X New	
Other: (explain)	Conditio	Special L			Accessor	☐ Addition	□ Mobile H	□ Bunkhou						or the first	□ Residenc	☐ Principal	•		it being applied fo	HARRIER CO. C.	rty	Run a Business on	Relocate (existing bldg)	ersion	Addition/Alteration	New Construction	Project
xplain)	Conditional Use: (explain)	Special Use: (explain)		Accessory Building Addition/Alteration (specify)	Accessory Building (specify)	Addition/Alteration (specify)	Mobile Home (manufactured date)	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.	Principal Structure (first structure on property)	· ·		(if permit being applied for is relevant to it)		□ Foundation	□ No Basement	☐ Basement	☐ 2-Story	☐ 1-Story + Loft	X 1-Story	# of Stories and/or basement
	A TANAMAN AND AND AND AND AND AND AND AND AND A			Alteration (specify)	agrage	The state of the s	ate)	☐ sleeping quarters, <u>c</u>	rage				The state of the s	The state of the s	shack, etc.)	ture on property)	Proposed Structure	Length: 고닉	Length:						🖎 Year Round	☐ Seasonal	Use
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×	×	×		×	(カグ× ヤ	×	×	×	×	×	×	×	×	×	×	×	Dimensions	Height:	Height:			ntract)	Privy (Pit) or Uaulted (min 200 gallon)	oify Type:	Specify Type:		What Type of Sewer/Sanitary System Is on the property?
0.000	- CANADA				576		and and individual for the same of the sam										Square Footage	6	G				allon)		X Well	☐ City	Water

Owner(s):X FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described properly at any plagonable type (or this pertical).

(If you are signing on behalf of the owner(s)

Authorized Agent:

Address to send permit Same \circ 5 Dove a letter of authorization must accompany this application)

> Date Date 5 ್ -14

ners rout sign or letter(s) of authorization must accompany this application)

Hold For Sanifary.	0	meria y	section: 10-31-14	Was Proposed Building Site Delineated Manner Report	ranted by Variance (B.O.A.) Ves No Case #:	ot □Yes	ermit #: 14-0407	The loss and the loss are sense. The loss are sense in formation (County Use Only) are sense.	(9) Stake or Mark Proposed NOTICE: All Land L For The Construction Of Ne	her previously surveyed corner or marked by a licensed surve for to the placement or construction of a structure more than the previously surveyed corner to the other previously surveye arked by a licensed surveyor at the owner's expense.	etback to Drain Field etback to Privy (Portable, Composting) for to the placement or construction of a structure within ten (10) feet of the m	etback to Septic Tank or Holding Tank	etback from the South Lot Line etback from the West Lot Line etback from the East Lot Line	setback from the North Lot Line Low A	setback from the Centerline of Platted Road setback from the Established Right-of-Way	Description	(8) Setbacks: (measured to the closest point)	Please complete (1) – (7) above (cricity)		-	To make the second seco	<u>.*</u>	ox below: <u>Draw</u> or <u>Sketch</u> your Pr
TRA: Hold For Affidavit:	(Butch	human habitation.	M. Futal	No		(Deed of Record) (Fused/Contiguous Lot(s)) (Fused/Contiguous Lot(s))	Permit Date: //_//	e local Town, Village, City, State or Federal agencies may Ily) Reacon for Denial:	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W). NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities are Required To Enforce The Uniform Duralities Code.	expense. ess than thirty (30) feet from the ri ble by the Department by use of a	1 2 W	& Feet	#0 + Feet Setback from Wetland 50 + Feet 20% Slope Area on property 110 ↑ Feet Elevation of Floodplain	RA NA Feet	1907 Feet	Measurement			See attachment		To make the second seco	North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%	oxbelow: <u>Draw</u> or <u>Sketch</u> your Property (regardless of what you are applying for) (1) Show Location of: Proposed Construction
Hold For Fees:	Date o	Mo-watu under pressu	Zonit Lake Dat	Were Property Lines Represented by Owner XYes XYes XYes	Case :	☐ Yes KNo Affidavit Required Affidavit Attached		# of bedrooms: Sanitary Date:	ain field (DF), Holding Tank (HT), Privy (Ping) If Construction or Use has not begun.	ck. the boundary line from which the setback must be me a known corner within 500 feet of the proposed site of t	milet he management for still to	•	etland on property dplain	e Bank or Bluff	Setback from the Lake (ordinary high-water mark) Setback from the River Stream Creek	Description	Changes in plans must be approved by the Planning & Zoning Dept.					oad) (*) Holding Tank (HT) and/or (*) Privy (P)	
	Date of Approval 2	suve in structu	ig District (R-1) s Classification (WA) s of Re-Inspection:	□ No		ed Oyes Ano) and <u>Well (</u> W).	asured must be visible from he structure, or must be			/////////////////////////////////////		NA Feet	Measurement	lanning & Zoning Dept						3

